

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 09/849,174

Filing Date: May 4, 2001

Applicant: Florent Perronnin, et al.

Group Art Unit: 2655

Examiner: Tim Lao

Title: Eigenvoice Re-Estimation Technique Of Acoustic
Models For Speech Recognition, Speaker
Identification And Speaker Verification

Attorney Docket: 9432-000135

4/A
31-04
JL

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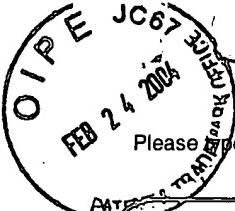
AMENDMENT

Sir:

In response to the Office Action mailed November 24, 2003, please amend the application as follows and consider the remarks set forth below.

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 7 of this paper.



02-25-04

HDP/SB/21 based on PTO/SB/21 (08-00)

2655

Please type a plus sign (+) inside this box →

ATTN:

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/849,174
		Filing Date	May 4, 2001
		First Named Inventor	Florent Perronnin, et al.
		Group Art Unit	2655
		Examiner Name	Tim Lao
Total Number of Pages in This Submission		Attorney Docket Number	9432-000135

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard;
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name Gregory A. Stobbs	Reg. No. 28,764
Signature			
Date	February 24, 2004		

CERTIFICATE OF MAILING/TRANSMISSION

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Signature		Date	February 24, 2004

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